REPORT OF AN INTERESTING CASE OF FEIGNED INSANITY.

By M. D. FIELD, M.D.

N December 17, 1887, my attention was called to J. D., who was then a prisoner at the Tombs, indicted on a charge of grand larceny of the first degree. If convicted under this charge, he would have been subject to from five to ten years' imprisonment. I learned that he had been at the Tombs since November 16th, a period of a little over four weeks. During this time the keeper stated he had been in the same state in which I found him; that since admission he had never spoken a single word; and that he had maintained a perfect indifference to everything about him; that he had never made any voluntary movement, except slight opening and closing of his lips. If taken hold of, he would follow wherever led; if put in a chair, or any place, there he would remain; he would not take food or water when placed in front of him, or if left beside him; and, given an opportunity to partake when nobody was present, it was never found that he had taken advantage of such opportunity. If food was placed in his mouth, he would swallow, in a mechanical sort of way; the attendants were very confident that it was difficult for him to swallow any solid food, and they were in the habit of giving him bread soaked in soup. They never knew him to voluntarily use the pails, the only means of relief in the cells; occasionally he would pass his urine in his clothing, or in the bed; a few times they have placed him on the seat and left him for several hours, when he had had slight passages from his bowels.

¹Read at the March meeting of the New York Neurological Society.

From the closest questioning, it seems to be a fact that his secretions were very much diminished, though, of course, he was having a meagre diet, with little fluids. So thoroughly convinced were the attendants that he would make no effort to help himself in any way, they were afraid to let him lie flat in bed, lest he should smother in the pillows and bedding; they would bolster him up, in a halfsitting position, and, though asked to make frequent observations, which they claimed to have done, during the night, they reported that they never found evidences that he had moved from the exact position in which they had placed him, and that they always found him in the same position, eyes open, and with the same staring expression. They also reported that in leading him out and in from his cell, the doorway of which was low, that he would strike his head against the iron frame, unless they took pains to push his head down low enough to go under. In this way he received several pretty severe blows, before they guarded against injury in this way. In fact, he appeared to all those about the prison to be without knowledge of, or interest in, things about him, being totally indifferent.

With this history, I saw and examined him for the first time on December 17, 1887; and I saw him a number of times afterward. He was a tall, spare man; rather pale and anæmic. He was led into the examination-room by one of the keepers, in front of a chair, when the keeper shoved him back, and he sank down without resistance, and seemed to simply fall into place. From this position he never moved. He had a fixed, staring expression. Only occasionally would he wink. He could not be made to speak, make any effort, or give any evidence that he comprehended what was said to him or what was going on about him. His dress and person bore every evidence of perfect neglect. His pulse was rather small and quick; his breathing was shallow; his temperature was apparently slightly subnormal (not taken by thermometer); all reflexes, both deep and superficial, appeared normal. His limbs, if raised out of position and then released, sunk back into position as if from gravitation, but not with the dead

fall of a paralyzed limb; there was nothing of a cataleptic nature about the case that I could observe.

I might remark here that two physicians who had seen the case had reported to the District Attorney that he was in a cataleptic, or cataleptiform, condition, and not in a condition to be tried. If I stood directly in front of the man and were to throw water in his face or prick his skin, he would give no manifestation of feeling. If I stood behind him, where he could not see me, and snapped drops of cold water from my fingers, so as to strike the side of his face, involuntary movement followed. I made firm and prolonged pressure upon the supraorbital nerve, the only response being that his face became much suffused and a few tears came from his eyes. But there was no expression of pain or anger in his face, though the pain inflicted must have been severe, and certainly was as great as I felt justified in producing.

I had repeated interviews with this man, and tried various inducements to get him to speak, but without avail. One day I had the photographs, which I will exhibit, taken. The light was poor, and the exposure made in both cases was over a minute and a half. I may remark that the photographer was astonished at the perfect quiet of the patient during that time, there being not the slightest evident movement. The distinctness with which the eyelashes are shown will indicate this. I do not believe that the man was any stiller while his photograph was being taken than during the whole of all, and every, interview that I had with him.

During his stay at the Tombs he must have lost some thirty or forty pounds in weight, and, in fact, he became very emaciated. I began to think he would starve himself to death. On inquiring into the history of this man, I learned the following:

That on or about the 7th day of November he stole a watch; made rational effort, and did escape; was afterward captured and taken to the 57th Street Court. Here he pled not guilty to the charge, and signed his name to the paper. That night he was reported by the prison keepers to have

made an outcry, and to have had "a fit." After that he would not speak or eat, and was stolid and indifferent; apparently in the same condition as I found him. I saw his father, who told me that when thirteen or fourteen years of age he received a fall; could give no definite injuries, but that he was laid up five or six weeks; that he had always been moody—at one time gay, at another time depressed. Family history negative. His father informed me that he had been working for his brother up to the day of his arrest; that he had never observed anything strange in his actions until he called upon him in prison. He told me that his son had been several times convicted of crime. I was informed by the police department that on July II, 1870, he was convicted for felonious assault, and sentenced to one year in the Penitentiary. On October 16, 1880, he was arrested, charged with larceny of gold watch and chain; was found guilty, and sentenced to two years in State Prison; that on November 1, 1882, he was charged with same offence; found guilty and sentenced to six years in the State Prison; was discharged in April, 1887. Nothing was known of him from that time until the present charge. At the time of arrest, on the present charge, was perfectly rational, and made offer to return the watch, or see that it was returned, if not prosecuted. The friends of I. D. and the authorities at the Tombs became alarmed at the manner in which he was running down, and the prison officials were anxious to get rid of him; but, owing to the peculiar report of the two physicians who had examined him for the District Attorney, who stated that he was in a cataleptic condition and not fit to be tried, yet not stating that he was either sane or insane, he could not be disposed of by trial; it was a difficult problem to know what to do with him. Being convinced that the man was feigning everything, I was anxious to have him sent to Bellevue Hospital for observation. He was finally sent to Jefferson Market Prison on December 29, 1887.

After this I lost track of him until one morning I saw an article in one of the daily papers, headed "The Silent Man departs," and then learned that he had managed to saw out a bar and made good his escape, on the night of February 5, 1888. He was aided in escaping by one John Mack, who was recaptured and sentenced to three months in the Penitentiary. The other day I had an interview with Mack, and learned that for nearly a month he had been talking with the prisoner; and that he had aided him in this deception, as he would keep watch and thus allow him to move about and get a little relaxation; if anybody approached, he would communicate with him and, of course, he would assume his old attitude.

I have reported this case on account of the interest it has been to me; not so much from the correctness of its simulating any particular form of insanity, as for the persistent maintenance of the condition assumed for so long a time. He must have lost from one-fifth to one-quarter of his entire weight by simply depriving himself, voluntarily, of food. And the wonderful power that he displayed of maintaining such a given attitude; the fixed stare being kept up constantly for weeks and even months. The manner in which he could have pain inflicted without any expression of pain or anger was wonderful.

Considered as a type of insanity, it was very true to that form of insanity described as stuporous insanity, or acute dementia. That form of insanity frequently begins suddenly and after some shock. Had an innocent person been cast into prison, or had a guilty man been brought up short for the first time, one could easily see that the shock would be sufficient to produce that form of insanity in a predisposed subject. Catalepsy appears with that form of insanity frequently. I did not find catalepsy, but two physicians, employed by the District Attorney, had so reported. The total indifference, stolidity, refusal of food, and refusing to speak, are all characteristic of that condition; the evident diminution of the secretions could be taken as an objective indication of this condition, for it really seemed very small, even in comparison with the small amount of food taken; the small and rather quick pulse; the slow and shallow respiration; the coolness of the skin; the temperature, if anything, being lower than normal.

The question might be asked: "Was not this nearer a case of melancholia with stupor?" To this we must reply that the attitude and expression was more one of stupidity than one of depression. There is more evidence in this form of insanity of knowledge of the surroundings than in one of stuporous insanity; and it is usually believed that the attitude of one suffering from melancholic avec stupor is maintained by the patient because he is dominated by some delusion; and we would not expect such a sudden onset as in this case.

On the other hand, the points against this being a case of a genuine stuporous insanity seem to me to be the following:

There was a strong motive for simulation; five to ten years in prison was staring him in the face; and the fact of this being his third conviction for this offence, he was likely to get the full penalty of the law. His family history, as given by his father, showed no predisposition; his rational actions up to and shortly after his arrest, while he showed insensibility to pain and to reflex action when he could prepare himself for and use his will, yet when off his guard his reflexes were all found to be normal, his pupils being actively responsive; though he swallowed mechanically, yet the readiness with which he did take food after it was placed in his mouth, if not indicating volition, showed very good reflex action. Though his pulse was small and his hands cool and his bodily temperature probably a little subnormal, he had not the deeply congested and clammy hands so common in cases of dementia.

Again, the stuporous insanity is rarely met with in persons over twenty-five years of age. Finally, if this was not a case of stuporous insanity, acute dementia, or melancholia with stupor, it would have to be rejected as coming near any form of insanity.

A fellow prisoner who was recommitted to the Tombs, reported that he saw this man a year and a half later looking well and prosperous.